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PTO/SB/05 (12/97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 3028.2.1 Total Pages 33

First Inventor : Timothy M. Kilgore

Title: A METHOD OF PROVIDING HEALTH CARE SERVICES

Express Mail Label No. ER731165817US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form
(Submit an original, and a duplicate for fee processing)
2. ☒ Applicant Claims Small Entity Status
3. ☒ Specification (Total Pages) 26
(Preferred arrangement set forth below)
 - Descriptive title of the Invention
 - Cross References to Related Application
 - Statement Regarding Fed sponsored R & D
 - Reference to Microfiche Appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. ☒ Drawing(s) (35 USC 113) (Total Pages) 5
5. Oath or Declaration (Total Pages) 2
 - a. ☒ Newly executed (original or copy)
 - b. ☐ Copy from a prior application (37 CFR 1.63(d))
(for continuation /divisional with Box 17 completed)
[Note Box 5 below]
 - i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: Assistant Commissioner for Patents
Mail Stop Patent Application
P.O. Box 1450
Alexandria, VA 22313-1450

7. ☐ CD-Rom or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
 - a. ☐ Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. ☐ CD-ROM or CD-R (2 copies); or
 - ii. ☐ Paper
 - c. ☐ Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. ☒ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement (when there is an assignee) ☒ Power of Attorney
11. ☐ English Translation Document (if applicable)
12. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s) if foreign priority is claimed
16. ☐ Nonpublication Request under 35 U.S.C. 122 (b)(2) (B) (i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☒ Other: Express Mail Certificate

18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.:
19. CORRESPONDENCE ADDRESS

- ☐ Customer Number or Bar Code Label 36491
☐ Or Correspondence address below

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CITY	Salt Lake City	STATE	Utah	ZIP	84111
COUNTRY	United States	TELEPHONE	(801) 994-4646	FAX	(801) 531-1929

Name: Michael W. Starkweather

Registration No.

(Attorney/Agent): 34,441

Signature: Michael W. StarkweatherDate: 03/01/2004

Please type a plus sign (+) inside this box → +

PTO/SB/05 (12/97)
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<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <p style="margin-top: 20px; font-size: small;">Note: Effective October 1, 2001. Patent fees are subject to annual revision.</p>		Complete If Known		
		Application Number	Not yet assigned	
		Filing Date	March 1, 2004	
		First Named Inventor	Timothy M. Kilgore	
		Group Art Unit		
		Examiner Name		
TOTAL AMOUNT OF PAYMENT		\$ 425	Attorney Docket Number	3028.2.1

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)																																																																																																																																																																																		
<p>1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account No.: _____</p> <p>Deposit Account Name: _____</p> <p>Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Charge the Issue Fee In 37 CFR at the Mailing of the Notice of Allowance <input type="checkbox"/></p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed:</p> <p style="margin-left: 20px;"><input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p>	<h3>3. ADDITIONAL FEES</h3> <table style="width: 100%; font-size: small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2520</td><td>1812</td><td>2520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1840*</td><td>1805</td><td>1840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>420</td><td>2252</td><td>210</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>950</td><td>2253</td><td>475</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1480</td><td>2254</td><td>740</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>2010</td><td>2255</td><td>1005</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>330</td><td>2401</td><td>165</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>330</td><td>2402</td><td>165</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>290</td><td>2403</td><td>145</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1510</td><td>1451</td><td>1510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive -unavoidably</td><td></td></tr> <tr><td>1453</td><td>1330</td><td>2453</td><td>665</td><td>Petition to revive - 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SUBMITTED BY				Complete (if applicable)	
Typed or Printed Name		Michael W. Starkweather		Reg. Number	34,441
Signature				Deposit Account User ID	
		Date	Mar 1, 2004		

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

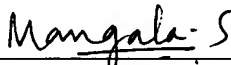
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Date of Deposit: March 1, 2004

I hereby certify that this patent application in the name of Timothy M. Kilgore, David L. Haas for A METHOD OF PROVIDING HEALTH CARE SERVICES, together with the drawings, a Declaration, Power of Attorney, and Petition, an Assignment and Recordation Form Cover Sheet, Information Disclosure Statement, PTO Form 1449, and Check No. 1235 for \$ 425 are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above in an envelope addressed to Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Respectfully submitted,



Mangala Shekar
Asst To Michael W. Starkweather

Date: March 1, 2004

Michael W. Starkweather
8 East Broadway, Suite 600
Salt Lake City, Utah 84111
Telephone: 801/994-4646